**Authorization of Recurring CREDIT CARD Payment for TransHelp Services**

**Step 1: Setup a Profile**

Call the Region’s Customer Contact Center at **905-791-1015** to setup a profile with the credit card you wish to use for your reoccurring credit card statement.

**Step 2: Complete the Form**

After you have obtained a setup a profile, complete the below form below and submit in person at a Service Peel Location or send back one of the following ways:

* **Mail:** c/o TransHelp Control Clerk, 2 Copper Road, Brampton, ON, L6T 4W5
* **Fax:** 905-277-5864
* **Scan and Email:** [transhelp@peelregion.ca](mailto:transhelp@peelregion.ca)

**Authorization for Recurring Credit Card Payment:**

This confirms that you have authorized the Region of Peel to automatically deduct payment for TransHelp Services from your credit card for the following:

|  |  |  |  |
| --- | --- | --- | --- |
| **Client ID:** | | Click or tap here to enter text. | |
|  | |  | |
| **Passenger Name:** | | Click or tap here to enter text. | |
|  | |  | |
| **Cardholder Name:** | | Click or tap here to enter text. | |
| **Method of Payment (Check one):** | | Visa | Mastercard |
| **Credit Card Last 4 digits:** | | Click or tap here to enter text. | |
|  | |  | |
| **Card Holder Phone Number:** | | Click or tap here to enter text. | |
|  | |  | |
| **Card Holder Signature:** |  | | |

**Choose One Option Only:**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| **Option 1: For General Account Requests**     |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | Amount Deducted Monthly: | | **$** Click or tap here to enter text.  **.00** | | | | | |  | | | |  | | | |  | | | | | | Deduction Frequency: | Every | | Click or tap here to enter text. | | | | day of each month | | | |  | | | |  |  |  | | | |
|  |
| **Option 2: For MPASS Requests** (only available from the 15th – 20th of each month)   |  |  |  |  | | --- | --- | --- | --- | | Amount Deducted Monthly: | | **$ 124.00** |  | | Deduction Frequency: | 15  16  17  18  19  20 | | | | |

*Forms and changes to amounts must be submitted no later 2 weeks prior to the scheduled deduction date otherwise the change will not take effect until the following month. Cancelations of this authorization can be done by calling 905-791-1015. Once cancelled, a new recurring CREDIT CARD form is required to reactivate. Changes to credit card information or the amount deducted, will require a new completed recurring CREDIT CARD form. If have any questions regarding this form including questions regarding your privacy collection of your personal information, please contact us at 905-791-7800 (toll free: 1-888-919-7800) or email us at* [*transhelp@peelregion.ca*](mailto:transhelp@peelregion.ca)*.*